12-21-05

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09/21/2005

Albert P. Sharpe, III, Esq. Fay, Sharpe, Fagan, Minnich & McKee, LLP 1100 Superior Avenue, 7th Floor Cleveland, OH 44114-2518



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Roseanne Giuliani	(Depositor's name
Loseane Guliani	(Signature)
December 20, 2005	(Date)
	-

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/699,820	10/30/2000	Ying-wei Lin	XER 2 0329 D/A0125	7170	

TITLE OF INVENTION: COLOR TO BLACK AND WHITE CONVERTER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		P	UBLICATION FEE	ICATION FEE TOTAL		TOTAL FEE(S) DUE		TE DUE
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CFR 1.363).	e address or indication of "F	,	(1) the na	mes of	the patent front pa up to 3 registered		ttorneys	1 Fay, S	Sharpe,	Fagan,
Address form PTO/SB/1	☐ Change of correspondence address (or Change of Correspond Address form PTO/SB/122) attached.		4 M33-1 C M-17 TT							Kee, LLP
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			registered attorney or agent) and the names of up to							
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATEN	T (print	or type)					 -
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified be n 37 CFR 3.11. Completion	elow, no assignee of this form is NOT	data will app Ta substitute	ear on for filin	the patent. If an a ig an assignment.	assignee	is identifie	d below, the d	locument ha	s been filed for
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Xerox Corp	oration		Stamfo	ord,	Connectic	ut				
Please check the appropriate	e assignee category or catego	ries (will not be pri	nted on the p	oatent) :	☐ Individual	Corp	oration or o	other private gr	oup entity (Government
4a. The following fee(s) are	enclosed:	4b	. Payment of	Fee(s):	· <u>-</u>					
✓ Issue Fee			A check	in the a	mount of the fee(s)) is enclo	sed.			
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☐ Advance Order - # o	f Copies		The Direction Deposit Acc	ector is count Nu	hereby authorized imber 24-00	by char	ge the requ	nired fee(s), or close an extra c	credit any copy of this f	overpayment, to form).
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Authorized Signature	Logsh D.	Date		_	Date _	$\overline{}$,	20, 200		
Typed or printed name _	Joseph D. Dre	her			Registi	ration No	o. <u>37</u> ,	123	<u> </u>	
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